

**MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET**

SERIAL NO. 10/271454
APPLICANT(S)

FILED DATE

CLAIMS

	AS FILED		AFTER 1ST AMENDMENT		AFTER 2ND AMENDMENT	
	IND	DEP	IND	DEP	IND	DEP
1			/			
2		/		/		
3		/		/		
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TOTAL IND.	1		1			
TOTAL DEP.	12		13			
TOTAL CLAIMS	13		13			

	IND		DEP		IND	
	IND	DEP	IND	DEP	IND	DEP
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BEST AVAILABLE COPY